

OFFICIAL FILE  
ILLINOIS COMMERCE COMMISSION

FORMAL COMPLAINT

ORIGINAL

Illinois Commerce Commission  
527 East Capitol Avenue  
Post Office Box 19280  
Springfield, Illinois 62794-9280

For Commission Use Only:

Case 00-0660

Regarding a complaint

by Ms. Tina Turner

(Person making the complaint)

against Commonwealth Edison (ComEd)

(Utility name)

as to Unjust denial of electric service, unlawful failure to communicate, dishonesty, wrongful threats, etc.

(Reason for complaint)

in Chicago

Illinois.

ILLINOIS  
COMMERCE COMMISSION  
AUG 14 2 24 PM '00  
CHIEF CLERK'S OFFICE

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is P.O. Box 368849, Chicago, Ill. 60636

The service address that I am complaining about is 5114-16 S. Damen Ave., Chicago, Ill. 60609;

ComEd account-numbers 2408-33-0404A, 2408-33-0406A, 2408-33-0408A, 2408-33-0410  
2408-33-0412A

My home telephone number is        N/A

Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at        N/A

Commonwealth Edison Electric Co. (respondent) is a public utility and is subject to the provisions of  
(Full name of utility company)  
the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with your complaint.

1. 220 ILCS 5/1-102(d) "Equity: the fair treatment of consumers...."
2. 220 ILCS 5/5-203 "Violations by individuals- Penalty"
3. 220 ILCS 5/8-201 "Denial....service during winter & Good faith dealing with customers"
4. Including any other violations of the Illinois Public Utilities Act, yet undiscovered, regarding this complaint.

Have you contacted the Consumer Affairs Division of the Illinois Commerce Commission about X Yes        No  
this complaint?

Has your complaint filed with that office been closed? X Yes        No

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.

1. (PLEASE SEE ATTACHED LETTER DATED AUGUST 7, 2000, WHICH SHALL CONTAIN THEREIN COMPLAINANT'S ENTIRE 22-CHARGES (AND/OR NUMBERED PARAGRAPHS) THAT SHALL COMPLETE THIS COMPLAINT AGAINST ~~ComEd~~ AND THOSE PARTIES WHO CONDONED ComEd's WRONGDOING AGAINST THIS COMPLAINANT AND OTHER PARTIES CONNECTED WITH THE AFOREMENTIONED SERVICE ADDRESS OVER THE PAST DECADE.)

Please clearly state what you want the Commission to do in this case.

1. Order ComEd to forthwith restore electric service to ~~the~~ building.
2. Forbid ComEd from disconnecting electric service until complaint is resolve
3. Penalize/punish ComEd to the fullest extent of the law, if it is determined ComEd violated the law in this ~~case~~.

4. Fire any ICC-employee found guilty of lying, stonewalling, or any wrongdoing.

Date: AUGUST 7, 2000

(Month, day, and year)

Complainant's signature

Tina Turner

If you will be represented by an attorney, please give the attorney's name, address, and telephone number.

Mr. J

Consultant

P.O. Box 368371

Chicago, Ill. 60636

You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).

#### VERIFICATION

A notary public must watch you fill out this part of the form.

I, TINA TURNER, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

Tina Turner  
(Signature)

Subscribed and sworn/affirmed to before me this

7

day of

August

2000

Novella Felton  
Notary Public, Illinois



#### NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.